

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(In the space above enter the full name(s) of the plaintiff(s).)

-against-

**COMPLAINT  
FOR EMPLOYMENT  
DISCRIMINATION**

\_\_\_\_\_  
\_\_\_\_\_  
Jury Trial: ☐ Yes ☐ No

(check one)

\_\_\_\_\_  
(In the space above enter the full name(s) of the defendant(s).  
If you cannot fit the names of all of the defendants in the space  
provided, please write "see attached" in the space above and  
attach an additional sheet of paper with the full list of names.  
Typically, the company or organization named in your charge  
to the Equal Employment Opportunity Commission should be  
named as a defendant. Addresses should not be included here.)

This action is brought for discrimination in employment pursuant to: (check only those that apply)

\_\_\_\_\_ Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e  
to 2000e-17 (race, color, gender, religion, national origin).

**NOTE:** In order to bring suit in federal district court under Title VII, you must first obtain a  
Notice of Right to Sue Letter from the Equal Employment Opportunity Commission.

\_\_\_\_\_ Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§  
621 - 634.

**NOTE:** In order to bring suit in federal district court under the Age Discrimination in  
Employment Act, you must first file a charge with the Equal Employment Opportunity  
Commission.

\_\_\_\_\_ Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 -  
12117.

**NOTE:** In order to bring suit in federal district court under the Americans with Disabilities Act,  
you must first obtain a Notice of Right to Sue Letter from the Equal Employment Opportunity  
Commission.

\_\_\_\_\_ New York State Human Rights Law, N.Y. Exec. Law §§ 290 to 297 (age,  
race, creed, color, national origin, sexual orientation, military status, sex,  
disability, predisposing genetic characteristics, marital status).

\_\_\_\_\_ New York City Human Rights Law, N.Y. City Admin. Code §§ 8-101 to  
131 (actual or perceived age, race, creed, color, national origin, gender,  
disability, marital status, partnership status, sexual orientation, alienage,  
citizenship status).

## I. Parties in this complaint:

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff      Name \_\_\_\_\_  
                    Street Address \_\_\_\_\_  
                    County, City \_\_\_\_\_  
                    State & Zip Code \_\_\_\_\_  
                    Telephone Number \_\_\_\_\_

- B. List all defendants' names and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant      Name \_\_\_\_\_  
                    Street Address \_\_\_\_\_  
                    County, City \_\_\_\_\_  
                    State & Zip Code \_\_\_\_\_  
                    Telephone Number \_\_\_\_\_

- C. The address at which I sought employment or was employed by the defendant(s) is:

Employer \_\_\_\_\_  
Street Address \_\_\_\_\_  
County, City \_\_\_\_\_  
State & Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case, including relevant dates and events. Describe how you were discriminated against. If you are pursuing claims under other federal or state statutes, you should include facts to support those claims. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. The discriminatory conduct of which I complain in this action includes: *(check only those that apply)*

\_\_\_\_\_ Failure to hire me.  
\_\_\_\_\_ Termination of my employment.  
\_\_\_\_\_ Failure to promote me.  
\_\_\_\_\_ Failure to accommodate my disability.  
\_\_\_\_\_ Unequal terms and conditions of my employment.

\_\_\_\_\_ Retaliation.

\_\_\_\_\_ Other acts (specify): \_\_\_\_\_.

**Note:** Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.

B. It is my best recollection that the alleged discriminatory acts occurred on: \_\_\_\_\_.  
Date(s)

C. I believe that defendant(s) (check one):

\_\_\_\_\_ is still committing these acts against me.

\_\_\_\_\_ is not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (check only those that apply and explain):

☐ race \_\_\_\_\_ ☐ color \_\_\_\_\_

☐ gender/sex \_\_\_\_\_ ☐ religion \_\_\_\_\_

☐ national origin \_\_\_\_\_

☐ age. My date of birth is \_\_\_\_\_ (Give your date of birth only if you are asserting a claim of age discrimination.)

☐ disability or perceived disability, \_\_\_\_\_ (specify)

E. The facts of my case are as follow (attach additional sheets as necessary):

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**Note:** As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, the New York State Division of Human Rights or the New York City Commission on Human Rights.

### III. Exhaustion of Federal Administrative Remedies:

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding defendant's alleged discriminatory conduct on: \_\_\_\_\_ (Date).

B. The Equal Employment Opportunity Commission (*check one*):

\_\_\_\_\_ has not issued a Notice of Right to Sue letter.

\_\_\_\_\_ issued a Notice of Right to Sue letter, which I received on \_\_\_\_\_ (*Date*).

**Note:** *Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.*

C. Only litigants alleging age discrimination must answer this Question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding defendant's alleged discriminatory conduct (*check one*):

\_\_\_\_\_ 60 days or more have elapsed.

\_\_\_\_\_ less than 60 days have elapsed.

#### IV. Relief:

**WHEREFORE**, plaintiff prays that the Court grant such relief as may be appropriate, including injunctive orders, damages, and costs, as follows: \_\_\_\_\_

\_\_\_\_\_  
(Describe relief sought, including amount of damages, if any, and the basis for such relief.)

**I declare under penalty of perjury that the foregoing is true and correct.**

Signed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Signature of Plaintiff \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number (*if you have one*) \_\_\_\_\_